

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SO	75316	8/8/70
O.I.P.E. CLASSIFIER		47	8/11/70
FORMALITY REVIEW	Ø	71070	8/30
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	8/15/70
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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